



Building & Development Services
 1102 Lohmans Crossing, Lakeway, TX 78734
 Phone: (512) 314-7540 Fax: (512) 314-7541
www.lakeway-tx.gov

APPLICATION FOR RESIDENTIAL BUILDING PERMIT

(CHECK ONE & INCLUDE NECESSARY SUPPORTING MATERIAL)

- | | | | |
|---------------------------------------|--------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> NEW HOUSE | <input type="checkbox"/> ADDITION | <input type="checkbox"/> POOL/SPA | <input type="checkbox"/> DECK/PATIO |
| <input type="checkbox"/> FENCE | <input type="checkbox"/> LANDSCAPING | <input type="checkbox"/> RE-ROOF | <input type="checkbox"/> HVAC CHANGE OUT |
| <input type="checkbox"/> OTHER: _____ | | | |

ADDRESS OF PROPERTY:		VALUE OF PROPOSED WORK:	
PROPERTY OWNER NAME:		TELEPHONE:	E-MAIL:
MAILING ADDRESS:		CITY:	STATE ZIP CODE
CONTRACTOR:	CONTACT NAME:	TELEPHONE:	E-MAIL:
MAILING ADDRESS:		CITY:	STATE ZIP CODE
BRIEF DESCRIPTION OF PROPOSED WORK:			

(FOR CITY USE ONLY)

<p>SUBMITTAL VERIFICATION/INSPECTION AUTHORIZATION:</p> <p>I, as owner of the property hereinafter referenced, do hereby execute this document, and acknowledge the above statements to be true and accurate to the best of knowledge. I have received, read and understand the terms and conditions of this request, and agree to compliance with all applicable codes and ordinances of the City.</p> <p>I understand that my contractor or subcontractor(s) identified below will schedule inspections on my behalf permitting city inspectors to enter my property to conduct the necessary inspections as scheduled.</p> <p>I authorize my duly authorized agent to coordinate with the City and its representatives to enter the property at reasonable times for the purposes of inspecting and monitoring the project according to the adopted codes of the City. This authorized agent is hereby given authority from me to consent to City inspections on my behalf.</p>	<p>PERMIT NUMBER:</p> <hr/> <p>AMOUNT RECEIVED:</p>
<p>OWNER'S SIGNATURE DATE</p>	
<p>PRINTED NAME OF OWNER</p>	
<p>PRINTED NAME OF GENERAL CONTRACTOR, SUBCONTRACTOR, OR OTHER AUTHORIZED AGENTS OF OWNER</p>	



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(ADDITIONAL SPACE AS NEEDED FOR AUTHORIZED AGENTS OF THE OWNER)

ADDRESS OF PROPERTY:

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